

EVALUATION CERTIFICATION FORM

I, (_____) have been a designated supervisor of (_____)
 Name of supervisor Name of trainee
 (_____). The termination of the supervising appraiser and trainee relationship was
 trainee permit number

effective on (____ / ____ / ____). Pursuant to **N.J.A.C. 13:40A-4.6(8)** this certification is an evaluation of the
 date
 activities performed by the trainee.

	Satisfactory	Unsatisfactory	Not Applicable/Comments
Understands USAP Goals			
Identifying Scope of Work Required			

Research of Subject Property			
Relevant Characteristics			
Sales History			
Contract of Sale (when applicable)			
Survey/Tax Map			
Applicable Zoning			

Cost Approach			
Building Costs			
Age/Life Factors			
Contribution of the Land			
Sources of Depreciation			

Sales Comparison Approach			
Identification of Neighborhood			
Location Variables			
Selection of Comparable Properties			
Market Conditions/Financing Factors			
Gross Rent Multipliers			
Acceptable Adjustment Methodology			

Income Approach			
Lease Agreements/Market Rent			
Development of Net Operating Income			
Capitalization Rates/Methodology			

Reconciliation			
Competent Analysis of Data Collection			
Ability to Express Analysis			
Certification Requirements			

Record Keeping			
Understands USPAP Requirements			

Signature of Supervisor: _____ Date: _____